



New Jersey Department of Children and Families Policy Manual

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Purpose 4-5-2010

This policy section outlines the provisions of the New Jersey Safe Haven Infant Protection Act and the policies CP&P (Adoption and SPRU Workers) and the State Central Registry staff follow when responding to referrals of Safe Haven infants.

Authority 4-5-2010

P.L. 2000, c. 58, New Jersey Safe Haven Infant Protection Act, amending N.J.S.A. 30:4C-15.5 et seq.

N.J.A.C. 3A:18, New Jersey Safe Haven Infant Protection Act Procedures and Requirements

Attorney General [Law Enforcement Directive No. 2001-4](#), Implementation of the New Jersey Safe Haven Infant Protection Act

Definitions 4-5-2010

"The Act" means P.L. 2000, c. 58, New Jersey Safe Haven Infant Protection Act, amending N.J.S.A. 30:4C-15.5 et seq.

"Hospital" means a licensed general hospital or a medical center operating in New Jersey pursuant to State law.

"Infant" means a live child who is, or appears to be, no more than 30 days old.

"Non-identifying Information" means information about an infant which is not intended to identify the infant, his or her parents, or the birth family.

"Parent" means an infant's birth mother or father.

"Police Station" means a manned State, county or municipal police station or State trooper barracks. The term includes Campus Police headquarters, community policing substations, or any other law enforcement facility operating within the State of New Jersey.

"Safe Haven Infant" means a live infant who meets all of the following six criteria:

The infant is or appears to be not more than 30 days old.

The infant was not abused or neglected.

A parent, or a person acting on the parent's behalf (i.e., a person acting at the request of the parent), brought the infant forward.

The parent is acting voluntarily, on his or her own volition.

The intent of the parent is to permanently give up all rights to the infant.

The infant was brought to and left with an officer at a police station or an employee of a hospital emergency department.

"Safe Haven for Infants Hotline" means the toll-free, 24-hour hotline, established and operated in the State Central Registry of the Department of Children and Families. The Hotline is reached by dialing 1-877-839-2339.

Overview of the NJ Safe Haven Infant Protection Act 4-5-2010

The purpose of the New Jersey Safe Haven Infant Protection Act is to encourage a parent who might otherwise have abandoned an infant in a life-threatening situation to leave the infant anonymously at a "safe haven," thereby saving the life of the infant.

Under the Act:

A parent who wishes to give up all parental rights to an infant may bring the infant (no more than 30 days old) to, and leave the infant at, either a manned police station or a hospital emergency department.

A parent may bring the infant to someone else (e.g., a friend, relative, clergyman), who then brings the infant to, and leaves the infant at, the police station or hospital emergency department on behalf of the parent.

The parent or other person acting on behalf of the parent may remain anonymous.

The parent's actions may provide the parent with an affirmative defense to prosecution for abandonment.

If an infant was brought to, and left at, a police station, the police are responsible for bringing the infant to the hospital or arranging for the infant's safe transport to the hospital.

The Act does not provide a defense against prosecution for any abuse or neglect committed against the infant by the parent, a caregiver, or other person acting on behalf of the parent, before bringing the infant to the police station or hospital, or for abandonment of an older child or infant under circumstances not governed by this Act.

Disclosure of Information Not Required 4-5-2010

Under the Act, a parent, or person acting on behalf of the parent, who leaves an infant at a police station or hospital emergency department is not required to disclose:

- His or her name or the name of the parent or infant, and
- Any information about the infant or birth family, including background or medical information.

A parent, or person acting on behalf of the parent, may voluntarily disclose identifying or non-identifying information to assist in planning for the infant's care and treatment.

Police Incident Report and Child's Medical Chart 4-5-2010

Before a police officer or hospital staff member gathers and records identifying and non-identifying information about an infant, he or she advises the parent, or person acting on behalf of the parent, of his or her right to remain anonymous. If the parent, or person acting on behalf of the parent, is willing to provide the information voluntarily, it is recorded in the police incident report and the child's medical record. This information may assist the Division in planning for the care of the Safe Haven infant. The information includes, but is not limited to:

- The infant's prenatal history and care, whether the infant was full term, and the infant's birth weight;
- The infant's present health, including physical or developmental disabilities or limitations;
- The infant's ethnicity, race, and religion of origin;
- The composition of the infant's birth family (e.g., age of each parent, whether the infant has any siblings);
- Whether the infant was given a name, and, if so, what name;
- The infant's date and place of birth;

- The physical and mental health of each parent, and whether either parent had any hospitalizations;
- Whether either parent is HIV positive, has AIDS, or has any other serious medical problems or conditions;
- Whether the birth mother used substances, including illegal drugs, took medications, or consumed alcohol while pregnant;
- Why the parent is giving up the infant; and
- When the mother is giving up the infant, whether the birth father and extended family members were aware of the pregnancy and/or are aware of the birth of the infant and the mother's plan to give up the infant.

The police officer or hospital emergency department staff gives the parent, or person acting on behalf of the parent, the telephone number for the Safe Haven Infants Hotline, in case he or she wants to provide additional information at a later date or has questions on the status of the infant.

Police/Hospitals Must Call Hotline

4-5-2010

- Pursuant to a directive issued by the Attorney General of New Jersey, if an infant is brought to a police station, a police officer is required to immediately contact the Safe Haven for Infants Hotline. For policies and procedures law enforcement agencies must follow regarding Safe Haven infants, see Attorney General [Law Enforcement Directive 2001-4](#), Implementation of NJ Safe Haven Infant Protection Act.
- Pursuant to State regulations (N.J.A.C. 3A:18-1.8(a)6), a hospital is responsible for contacting the Hotline, no later than the first working day after receiving the infant, to enable the Division to take care, custody and control of the infant. For policies and procedures hospitals must follow regarding Safe Haven infants, see II M 2181, Hospital Procedures Pursuant to the NJ Safe Haven Infant Protection Act.

Safe Haven Calls to Local Offices

4-5-2010

If a Local Office receives a call regarding the Act or a Safe Haven infant, refer the caller to the Hotline.

Hotline Responsibilities of SCR Staff 4-5-2010

The Safe Haven for Infants Hotline is answered by the Call Floor Supervisor at SCR. The Hotline is answered "Safe Haven for Infants." The Supervisor, or SCR Screener, if a Supervisor is not on site:

- Provides information, support and guidance to persons who may be considering giving up or abandoning a newborn or an unborn child.
- Accepts calls from hospital emergency departments or police stations to report a Safe Haven infant. Proceeds in accordance with [CP&P-IX-D-1-100](#), Critical Incident Reporting, handling the call as a critical incident.
- Does computer checks in accordance with Division screening protocols, if any identifying information about the infant or birth family is available.
- Assigns referrals to the appropriate Local Office or to SPRU, after-hours, for a child welfare service assessment and placement.
- If the caller is the parent or a relative of an infant who was left at a hospital or police station, the Supervisor/Screener gathers and records as much information as the caller is willing to share voluntarily, and tells the caller that:
 - By law, CP&P will need to file for termination of parental rights (TPR) within 21 days of being awarded custody of the child, and
 - If the parent or relative has changed his or her mind, wants to identify him or herself, and regain custody of the infant, or be involved in developing the permanent plan for the infant, he or she needs to contact CP&P within 21 days of leaving the infant.
- Provides education and information to the public to:
 - Promote safe placement alternatives for newborn infants;
 - Explain procedures established by the Act (e.g., anonymity offered to the parent, or person acting on behalf of the parent; the Act provides an affirmative defense for abandonment); and
 - Explain adoption procedures in New Jersey.
- Refers adoption inquiries to the appropriate office or agency in DCF.
- Monitors the handling of Safe Haven infant inquiries and calls. Every call is documented on the "Safe Haven for Infants Telephone Control Log." The "Call Follow-Up Form" is used to document any complicated matters, call backs, and follow-up inquiries. The Screener completes the Intake Windows and the DCF Form [1-1](#), Screening Summary.

Adoption Worker/SPRU Assess Referral 4-5-2010

The SCR Call Floor Supervisor or Screener accepts the call on a Safe Haven infant from the hospital or police as a child welfare service referral (request for adoption planning) and immediately assigns it to the appropriate Local Office or to SPRU, after hours (see [CP&P-II-C-1-200](#), Section L, Exceptions When Naming the Office of Supervision). The Local Office assigns the assessment to an Adoption Worker.

The table below outlines the Adoption or SPRU Worker's response to the referral.

Actions of Adoption or SPRU Worker upon Receipt of Safe Haven Infant Referral

Action	Adoption Worker	SPRU Worker
Response	Immediate - The Worker makes in person contact with the infant no later than the end of the work day in which SCR assigned the referral to the Local Office for response.	Immediate - Contact the SPRU Supervisor before initiating any response activity and proceed as directed by the Supervisor.
Handle as a Critical Incident Referral (see CP&P-IX-D-1-100)	Initiate a report through the local chain of command to the Deputy Director, who, upon consultation with the CP&P Director, when necessary, determines and confirms whether the infant meets the Safe Haven criteria (for criteria, see definition for "Safe Haven Infant").	Contact the SPRU Supervisor, who initiates a report through the local chain of command to the on-call member of Executive Staff, who determines and confirms whether the referred infant meets the Safe Haven criteria. Proceed as directed.

Contact Division of State Police, Missing Persons Unit *	<p>Call the Missing Persons Unit at 609-882-2000 requesting a police check of missing person files to determine if the infant was reported kidnapped or missing in New Jersey or in another state. The Unit is the central law enforcement contact and lead agency in all Safe Haven cases. Unit staff is available on a 24-hour basis (after hours, a member of the Unit is contacted by pager). Request an affidavit or certificate from the Unit regarding its efforts.</p> <p>The State police advise the County Prosecutor's Child Abuse Unit about the Safe Haven infant no later than the next business day.</p>	Same
Contact local police or law enforcement agency *	<p>For infants left directly at a hospital, notify the local police in the jurisdiction in which the hospital is located. If the infant resides in or came from another jurisdiction, notify the local police or law enforcement agency in that jurisdiction.</p> <p>If the infant was first brought to the police, contact the police officer assigned to the case. Gather details. Confirm that relevant information is recorded in the police incident report and was provided to hospital staff for the child's medical chart. Obtain the police incident report number for future reference. Request that a copy of the police incident report be sent to the assigned Local Office when completed.</p>	<p>Same</p> <p>Same</p>
Respond in person to hospital	<p>Provide Medicaid coverage for the infant to meet the infant's medical needs.</p> <p>Gather information on how the child was brought to and left at the hospital from staff having first-hand knowledge. Request that all information be recorded in the child's medical chart, and that a copy of the chart be sent to the assigned LO.</p> <p>Request hospital staff create a birth certificate for the infant (may be referred as a "baby doe" birth record).</p>	<p>Same</p> <p>Same</p> <p>Same</p>

Assume care, custody and control of infant	Pursuant to the Act, immediately assume care, custody and control of the infant as an emergency removal without a court order. Complete CP&P Form 21-31 , Safe Haven Notice of Emergency Removal, to document that CP&P assumed care, custody and control of the infant. Give the completed original copy of the form to the hospital for insertion into the child's medical chart. Retain a copy for CP&P files.	Same. The SPRU Coordinator forwards a copy of the SPRU Worker's CP&P Form 21-31 to the assigned Local Office.
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Note: The starred actions (*) taken in the above table are in accordance with [Law Enforcement Directive Number 2001-4](#).

The Adoption Worker in the Local Office continues the response as outlined below.

CP&P Petitions Court for Custody 12-6-2010

After CP&P assumes care and custody of the infant, the Adoption Worker petitions the Superior Court, Chancery Division, Family Part, in the county where the Local Office is located, for custody of the child and authorization for medical testing, including, but not limited to, testing for HIV and AIDS, and DNA profiling. If a parent or relative later comes forward to claim the child, the DNA of the infant compared to the parent or relative can be used to establish or rule out the relationship.

The petition must be filed and the hearing held by the Court no later than two court days after the Division assumed custody. The Court must determine whether reasonable efforts to prevent placement are required or whether an exception to the requirement for reasonable efforts to reunify the infant with a parent has been established pursuant to N.J.S.A. 30:4C-11.3. The Division complies with the tenets of the court order. See NJS Legal Forms for Complaint for Guardianship (Safe Haven): Form.

NJS TIP: To access the form go to Create>Casework>Court/Legal>Legal Documentation Window>Document Dropdown>Text Hyperlink.

For sample language for the court order regarding authorization for medical testing, see II M 2127, Appendices - Sample Language - Safe Haven Infant Court Order.

Identifying or Reunifying Child Not Required 4-5-2010

If the Superior Court, Chancery Division, Family Part, determines that an exception to the requirement for reasonable efforts to reunify the infant with a parent has been established pursuant to N.J.S.A. 30:4C-11.3, a Division representative is not required to initiate action to search for or otherwise identify the parent or birth family of a safe haven infant or attempt to reunify pursuant to N.J.S.A. 30:4C-15.8. The Division places the infant with a potential adoptive parent as soon as possible. See N.J.A.C. 3A:18-1.12(a).

Child Placed Directly into Adoption Home 4-5-2010

As soon as a child is identified as a Safe Haven infant, the Adoption Worker contacts the Office of Adoption Operations to match the child with a licensed adoptive family (see [CP&P-IV-C-10-100](#), Selection Services).

Once a Safe Haven infant is medically cleared for discharge from the hospital and the court has given CP&P placement authority, the Adoption Worker places him or her directly into an adoptive home. If the infant presents with a higher level of acuity or has special needs, the Adoption Worker places the child in an appropriate setting, to address his or her unique needs.

CP&P Must File for TPR Within 21 Days 4-5-2010

In accordance with the Act, within 21 days of assuming care, custody and control of the infant, CP&P must file for termination of parental rights, if no parent or relative has come forward by that date who is willing and able to care for the infant (N.J.S.A. 30:4C-15.1b(3)). See the section below if the Division becomes aware of the identity of the infant, parent, birth family or other person who acted on behalf of the parent.

The Adoption Worker conferences with the Deputy Attorney General (DAG) assigned to the Local Office regarding the filing of TPR. See [CP&P-IV-C-1-500](#), Termination of Parental Rights (Guardianship).

Consult DAG if Parent or Infant is Identified Before TPR Is Granted 4-5-2010

Pursuant to N.J.A.C. 3A:18-1.13, if the infant, his or her parent, the birth family, or the person who acted on behalf of the parent, is identified before parental rights are terminated, the Adoption Worker consults the DAG assigned to the Local Office to determine:

- How to proceed, and
- Whether anyone needs to be advised of the infant's existence (e.g., whether to contact the parent, the other parent, or other members of the birth family, and work with them in developing a permanent plan, or follow another course of action).

The determination is made on a case-by-case basis, taking into account factors including, but not limited to:

- The safety and protection of the infant;

- The safety of each parent, or person acting on behalf of the parent, who left the infant at the police station or hospital emergency department (especially when there is a history of domestic violence);
- The intent or apparent intent of the parent, or other person acting on behalf of the parent, who left the infant at the police station or hospital emergency department under the protections provided by the Act;
- The parental rights of the other parent, including the rights of the birth father or legal father; and
- The infant's right to a permanent, safe home, including the infant's right to reside with and be raised by a parent or another member of his or her birth or extended family, whenever possible.

Advise Missing Persons Unit if TPR Granted

4-5-2010

If a TPR order is granted, the Adoption Worker notifies the Missing Persons Unit so the State police can take action, as appropriate, to adjust or rescind missing persons' notifications.

If the Infant Is Abused or Neglected 4-5-2010

If an infant left at the police station or hospital emergency department appears to be abused or neglected, the police or hospital staff must immediately notify SCR. SCR accepts the call as a child protective services report and assigns the report to the appropriate Local Office or SPRU for investigation. The Local Office notifies the County Prosecutor (see [CP&P-II-C-4-200](#), Conditions Reportable to the Prosecutor).

To expedite an appropriate placement, both an Intake Worker and Adoption Worker are assigned to Safe Haven cases with CPS concerns. The Intake Worker receives the primary assignment until the investigation is fully completed so that all investigatory tasks flow to the Intake Worker. The Adoption Worker receives a secondary participant assignment to enable the Adoption Worker to do all necessary adoption planning and processing tasks. If the goal remains adoption when the child protective services investigation is complete, the case is transferred to the Adoption Worker.

The only exception, whereby the call regarding the infant is accepted as a child welfare services referral, and assigned to an Adoption Worker at the Local Office for assessment, is an infant, who:

- Meets all of the Safe Haven infant criteria, and
- Tests positive for drugs or alcohol (i.e., neglect, see Allegation of Harm #15/65 Substance Misuse).

If the parent comes forward or is found later, an allegation of neglect is investigated (see [CP&P-II-E-1-1300](#), Risk of Harm Due to Substance Abuse (By the Parent/Caregiver or the Child)).

Media Inquiries 4-5-2010

Direct any press or other media inquiries about a Safe Haven infant or the Safe Haven Infant Protection Act to the DCF Office of Communications and Public Affairs, at (609) 292-0422.

Relevant NJS Forms and Windows 4-5-2010

- Intake Windows
- Investigation Window
- CWS Assessment Window
- Legal Action Window
- Legal Status Window
- Placement Request Window
- Placements Window
- Adoption Planning Window
- DCF Form [1-1](#), Screening Summary
- DCF Form [2-1](#), Investigation Summary
- DCF Form [3-1](#), CWS Assessment Summary
- Complaint for Guardianship (Safe Haven)

Other Forms 4-5-2010

- Safe Haven for Infants Telephone Control Log
- Call Follow Up Form
- CP&P Form [21-31](#), Safe Haven Notice of Emergency Removal

Related Policy 4-5-2010

- [CP&P-IX-D-1-100](#), Critical Incident Reporting - Reportable Incidents Involving Children
- [CP&P-II-C-1-200](#), Office of Supervision, Exceptions
- [CP&P-II-C-4-200](#), Conditions Reportable to the Prosecutor
- [CP&P-IV-C-1-100](#), General Description of Adoption Services
- [CP&P-IV-C-1-500](#), Termination of Parental Rights (Guardianship)
- Attorney General [Law Enforcement Directive 2001-4](#), Implementation of NJ Safe Haven Infant Protection Act
- [NJ Safe Haven Infant Protection Act Protocol for Hospital Emergency Departments](#)
- II M 2127, Appendices - Sample Language - Safe Haven Infant Court Order